



STATE LICENSING BOARD FOR RESIDENTIAL AND GENERAL CONTRACTORS

237 Coliseum Drive, Macon, GA 31217

Phone: 478-207-2440 Fax: 470-312-2796

www.sos.ga.gov/index.php/licensing/plb/46

CHANGE OF NAME OR ADDRESS FOR INDIVIDUAL OR QUALIFYING AGENT

There is NO CHARGE to change a name or address on an Individual or Qualifying Agent license. To change your name, submit legal documentation of the name change (Marriage Certificate, Divorce Decree, or Court Order) and a copy of a driver's license, state issued ID card, or passport showing the new legal name. (Original documents will not be returned.)

License Type: ☐ Individual # _____
☐ Qualifying Agent # _____

PERSONAL INFORMATION

1. Current Name as it appears on License: _____
FIRST MIDDLE LAST SUFFIX

2. New Legal Name to appear on License: _____
FIRST MIDDLE LAST SUFFIX

3. Social Security#: [][][] - [][] - [][][][][] Date of Birth: [][] - [][] - [][][][][]
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4. New Physical Address: _____
(PO BOX NOT ACCEPTABLE) NUMBER AND STREET APT#
CITY STATE ZIP

5. New Mailing Address: _____
(if different) NUMBER AND STREET OR P.O. BOX APT#
CITY STATE ZIP

6. Daytime Phone#: [][][] - [][][] - [][][][][] Business or Cell Phone#: [][][] - [][][] - [][][][][]

7. Email Address: _____

Your name, mailing address, and license number are public information. They will appear on your License Pocket Card and on the public listing of your license on the Secretary of State's website. Your email address will not be public or shared with third parties.

Licensee Signature

Date

